INTERAGENCY COORDINATING COUNCIL MEETING MINUTES Thursday, March 30, 2017

PRESENT

Tina Bay
Beth Larson-Steckler
Valerie Bakken
Sarah Carlson
Stephen Olson
Carol Brakel

Tammy Lelm
Jodi Hulm
Holly Major
Moe Schroeder
Jill Staudinger

Staff Present:

Amanda Carlson, Part C Coordinator Colette Perkins

Guests:

Roxane Romanick, Designer Gene's
Missi Baranko, Lutheran Social Services
Kayla Fender, Transition & Diversion Coordinator
Eric Monson, Anne Carlsen Center
Becky Matthews, BECEP

TOPIC: OVERVIEW OF AGENDA

Move the Conflict free Case Management agenda item to the Grads 360 Overview.

TOPIC: FAMILY STORY

The parent was unable to attend as daughter just got out of the NICU and the respite care provider cancelled.

TOPIC: WELCOME

Sarah - son has some health complications with schedule changes.

Tammy - SB 2241 potential revision to autism spectrum disorder database was killed but Health Dept. convened

an advisory group on Saturday. Went through mandatory reporting boards and associations to make sure information was shared well and invited family advocates. It went well, with lots of bridging and learning.

Beth - recent discussion looking to amend homeless questionnaire to see if they have children that are younger and want to assist in the identification better.

Jill - partnering has been around legislation. Staff are saying referrals are steady and need is still there. Last week providers present with first early childhood conference incorporated home visiting coalition and DPI and opportunities to network and share information.

Kelli - needs to submit application.

Valerie - early childhood conference last week but unable to attend. Heard good things about presenters. Prior to that early childhood day at the capitol. Thank you to Sandy for organizing and Roxane for getting press there.

Jodi - working on MMIS issues and legislation.

Carol - referrals are steady and keeping busy.

Steve - legislatively working with pediatric group on medical services side to improve reimbursement levels for OT and speech.

Moe - Family Voices - working on legislation. Providing an increase in calls for families in navigating services. Put out call for application for parent leadership institute and thanked Health Dept. for providing sponsorships this year and there are 12 spots left.

Sarah - sent request to Family Voices consultant in Williston. Governor's Office not looking at applications until April or May. Region VII representative potential candidate is Christopher Pieske. Carol said Lana has not received an application so Carol will send Amanda Lana's email address.

Agenda Item for June - Council Membership.

TOPIC: NEW BUSINESS

Family Survey - Provider Response

At the January meeting, the Council talked about getting feedback from providers/stakeholders and how the survey is delivered and a methodology. Met and came up with questions and Amanda disseminated that information, which are in support of option 2. There were other great comments and suggestions.

Challenge of an online survey is to have an identifier so someone doesn't fill out an online survey and a paper copy. Recommend to consider that in the introduction letter describe the survey and the random number is not linked to you but to track duplication. Put a number on the survey and that number would also be entered into survey monkey as their number. Each region gets x number of surveys, online access to print out and an identifier as 1.1, 1.2, etc. are for Region 1.

Let's give this to the subcommittee and suggest option 2, online, explanation for DDPM and letter and then bring back to the Council. Date for handing out was to be decided today.

Handout option was to handout out at annual IFSO meeting or the periodic review meeting.

Last year we did a mail out option. Mailed out mid Dec and gave about 10/14 days to return and then extended it out. After cut off, we did get a handful maybe 7. Online an option as we are allowed only 10 questions and do a hand delivery and understand that our return rate will be lower.

Does DHS have other options? We have talked to our Decision Support Services unit but haven't talked about any costs and have discussed on the ICC multiple times. DSS has said online has not changed the response rate. We have had lots of conversations about duplicity.

Do handout and making improvements from last year and not do an online option. We could do May through October. Scrips have been done. State should pay for the return postage.

Agenda Item - put on Dec. agenda and Executive Committee bring to the Dec. meeting actual online options for next year.

Council discussion & recommendations for FFY 2016 survey

See above discussion.

GRADS 360 Overview

This presentation will be held at the June joint meeting.

Experienced Parent

Experienced Parent has been around for 20 years. Experienced Parents are a parent of child that has been in early intervention and to provide support to agencies and families that are receiving services - supporting family receiving a new diagnosis for child, support during staff meeting having person centered language, family perspective of decisions made by providers, and some regions do newsletters, family outings coordinated by Experienced Parent.

DD presented their budget for legislative session. Direct service money has been utilized more and more over the past several years. 2012 - families didn't have an option and had to utilize Medicaid and OSEP gave direction that this is not mandatory and family not enrolling in Medicaid are now utilizing direct service dollars plus being using for the first partial month. Average of 35 families that are using the direct service money. Direct services is using a lot Part C funding.

Experienced Parent budget for biennium was about \$400,000 and was eliminated in the budget but the funds were reallocated to the direct service funding. This has raised some concerns. House side amendment that added money to Experienced Parent - \$100,000 and now over at the Senate and is continue advocacy for additional funds in the state.

HB 1012 passed house with this amendment.

Recognized value of the role and prudent for council to continue to discuss, is there a possibility of additional funds and if \$100,000, how will it be utilized and protected for the Experienced Parent. This program is critical and we need to continue it and we should do what we can do. Who is your champion on the Senate side? It was stated that the House listened to our stories and asked for solutions. SB 2325 Sec 2 - requested a legislative study to look at that the Part C system. Requests during testimony to House and Senate - keep Experienced Parent over the next biennium and look at the legislative study and now there has to be restructuring to reach families and child within N.D.

Experience with legislators who are the stronger legislators who have pulled to go behind scenes to get you what you need. Who is having those conversations with those legislators?

\$400,000 reallocated to direct service to stay and \$100,000 is new. DD grants has a \$12m shortfall and intent that is a reduction of rates. It will impact the rate, the 4 Infant Development pay points will have to be reduced depending upon how we come out of session.

Experienced Parent and the Council needs looks at the level of service and it is not the same across the state. Study going on - how to get the service equally across the state and not just in certain regions.

The \$100,000 is state general fund money. Suggestions for Council discussion — what are the recommendations on how to use that money which is only \$50,000 a year which is a lot less. Adding stakeholders comment and finding out how the additional money will be used. Use on direct service or impact policy. Request in Jill's' testimony was to direct DHS to add another \$150,000 out of Part C budget to look at funds allocated to other contracts which would bring us up to amount currently being used in Part C budget. Reallocate some funds and talk about through Council reallocating out of technical assistance and right track funding and that would be a consensus of Council to recommend that.

The end of Feb we have used \$52,500 for Experienced Parent for the past 8 months, started July 1, 2016. Add in addressing direct service. Most recent recommendation to use Experienced Parent to have discussion with families not enrolling in Medicaid to make sure they are aware of choice and impact of choice.

Provide raining to answer the question regarding consistent quality, etc.

Why not put out as an RFP(Request for Proposal) to one organization and they have to work with state office and work together in carrying out those duties. Feel as a state system we are not supporting the parents and have an entity to supervise Experienced Parent and work with state office to make sure we are doing what we need to be.

Now they are handled through the Human Service Centers. The state could not dictate to whatever entity as to whom they can hire. In previous discussions, the Experienced Parent wanted to maintain their job.

SB 2325 sec 2 for study part, passed - what needs to be gleamed from the study and making sure Experienced Parent is continuous across state to bring forth a concern. How efficient will service be when dividing \$50,000 - can we say it is not enough and this is why we need more.

The Division allocates money to do parent training, etc. and we are siloing this and not seeing what we can pull together. This is statewide and there are other depts./organization across the state to meet the common goals.

Delegate to a system familiar with family consultation to include cost to supervise Experienced Parent and with limited budget what would that look like. Pooling resources and we bring specifics to the service and Dept. sends out and can tell us what the 3 entities are making in regards to supervising and put out an RFP and take the best proposal or look at what everyone is doing and leverage. Other states contract directly from Dept. to entity. There are other options and don't think we have fully explored them.

\$100,000 is there recommendation for more than \$100,000. It was a letter and to Maggie, Tina, and the

fiscal agents asking for a little off of the top to get us through the study.

Roxane talked with Sen. Dever to put the amendment in. They want to have 1012 out of subcommittee out by Fri. While in subcommittee have potential to have an amendment drafted.

\$700,000 for one year is devoted to child find/right track - group looking at ways to provide service more cost effective and gives a recommendation to the Dept. Subgroup is doing some of that work. Home visiting coalition has screening programs and looking at all screening programs across the state and some opportunities for the state.

Look at as a Council to support designation of additional funds and taking out of right track? Looking at MTAC and Right Track and supporting the move. Currently spending \$143,000 a year estimated for Experienced Parent.

Advise state office to evaluate the recommendation to see if it is feasible for them to make it work.

A motion was made by Jill to recommend that the Dept. look at percentage cut across contracts to put more in the Experienced Parent line item to continue to have a functional building block over the next biennium with intent to have a study. There was no second, so the motion failed.

Did DHS decrease other contracts within budgeting process? The Division streamlined contracts as much as we could. Increased MTAC because of SSIP and professional development activities and they did see an increase.

Right Track - looked at what they were written for but we didn't reduce the rate.

HB 1012 - wise to wait and see what comes out of budget first. Having the Council recommendations/support would be an influence. There was a letter sent to DHS already with the information in there. Where does council sit on that letter, does the council support or not - talking about the \$160,000 - yes.

The letter asked to reduce 15% of each contract and \$100,000 had not been secured.

A motion was made by Valerie Bakken and seconded by Tammy Lelm that the Council makes a recommendation to DHS to supplement the Experienced Parent shortfall by looking at other available contract budgets. Members that abstained from the vote: Tina Bay, Jodi Hulm, Sarah Carlson, and Carol Brakel. Motion carried.

Part C Budget/Application

Part C application - the Division was late in issuing notice so the public comment period is March 6 through May 4. This will not impact level of determination or impact our grant award.

Advising and assisting how are we then to provide support in decision and presenting to Gov, if we can't talk about the budget.

The Division will start building its budget in 2018 and instructions around March/April 2018 to build for the 19/21 session.

ICC are we providing on support on the ICC budget or the DD/DHS budget. Advising on Part C but certain restrictions that the Division cannot talk about.

The Part C Budget is not a Standing Agenda Item it is under New Business. It was stated that we should be

talking about the budget at every meeting. We need to see how this new budget will play out and what problems might come up and we need to find ways to advocate for more money or spend the limited amount of money we have. With the budget we have it is hard to understand with current spending and what is projected.

What may be helpful have another line at the end could we have SFY 17 projected?

The Division took the \$824,253 and divided by the months utilized and that is what we project what we well spend. Do you want to know this information monthly and look at trends over the last few years.

It is hard to provide public comment and it has been 8 months and spent \$824,235 but in grant we are saying this much money goes toward it and we aren't going up that much in costs.

Have a column with a projection column for the budget - contract can put the contracted amount. Projection for direct service - utilization for the last x number of months. On the application have \$1m for direct service. If we know it will cost \$1.2 or \$1.3 at the time but we have a different amount in the application.

Amanda has talked about that OSEP asks that the total amount you put in your application what your gran t award is going to be - it can't be under but can it be over, but she has not received an answer on her question. Dollar amounts are different because sequestration, Obama, etc.

Projected column - reflects what is on the Part C application for the years we are expending for the state fiscal year, so we can see the trend. Audiologists we are listing \$25,000 but we are expanding \$6,000.

Project the numbers out that you put in the budget, this year we would spend quite a bit less than the last 2 years. \$100,000 being spent less in direct service. Is the 4^{th} quarter the most expensive quarter? Nice to have a quarterly budget.

Roxane stated that we looking for \$160,000 for Experienced Parent. Public report not accurate enough to show that the next biennium you potentially have to make cuts to contracts. Could have we started the session with encumbered state funds to support the system that the Part C grant money cannot carry? The elephant in the middle of the room, is the lack of admin oversight and prioritization within the Dept., fuel today looking at DD Council testimony and their funding and FTEs. Working with DHS regarding more transparency regarding the funding situation.

Do we know based on these budget numbers - what is the 5 year plan for this program? Does DD have a plan and how far out do you plan? \$695,000 requested direct service funds and keep contracts where they are at for 17/19.

It was stated that the government does a 2 year budget and not projecting ahead for the next 5 to 10 years.

If this study isn't picked up, what does the Council want to do, what other systems can we tap into to sustain our program?

Clarification on the subcommittee, who makes sure the subcommittees meet? Each subcommittee designates a chair and reports back to the Council. Budget Subcommittee can continue and establish a chair and whatever other subcommittees are established they need to appoint a chair.

Make a list of the subcommittees, the chairperson, and the participants. Establish minutes of those Subcommittees.

What does the ICC want the Budget Subcommittee to do? Budget Subcommittee has been active since last Dec and meeting regularly through Jan and then took a short break. They are in the process of setting up another meeting and bring back suggestions to the State Office on Right Track.

A motion was made by Moe Schroeder and seconded by Steve Olson that Jill Staudinger becomes the chair of the Budget Subcommittee. Motion carried. Jill asked do we want Amanda and Tina present at the subcommittee and Tina asked Jill to send her the meeting notice.

\$695,000 direct service had reductions because of the 2% reduction. It will be in the Infant Development table. Infant development coming out of DD grants dollars or Part C will you have to designate another billing source. With this money, for the next legislative session and we don't get the study will be advocating again to keep those dollars in there and does DHS feel we have a better handle on what are projected flat spending will be.

Insurance covering and cost sharing has been brought up by some families from out-of-state - CO has an insurance trust fund and we have started the conversation. We would need to make sure that we would have the infrastructure in place also. Benefit some states have said they are seeing less no shows from families, but it is not a great financial benefit to their program.

What are our options to maintain our programs as we have them? Subcommittee needs to find alternative ways to fix this. Need to be vigilant and having the

subcommittees meeting and developing other ideas/processes. By March of 2018, the subcommittee/ICC has a solid plan in place to provide to the Dept.

In watching the autism reform bill this session we need to have David Z participate in that subcommittee.

2017 Legislative Session

HB 1012 - up for DD discussion today at 3. DD has a 2% reduction on overall direct services and OAR that we asked for and supported in Gov. Budget and add 500,000 specialized services and an additional FTE for Dept. to hire a nurse for specialized services and this FTE was removed and now we have 200,000 for specialized services. No inflationary increases for providers now.

Family Subsidy removed on house side that can impact families. It was included in Dalrymple budget and house removed it.

HB 1187 - relating to the medical food program for phenylketonuria or maple syrup urine disease - went through little things and look at providing for individuals through the life span and amended and passed to increase males to age 26. Didn't provide any appropriations and we need to absorb in operating. Females is age 45 because they are child bearing.

SB 2060 - relating to parental notification of early childhood services investigations - passed on March 24 and return to Senate on March 27 and signed on March 28 and sent to the Gov.

SB 2180 - relating to the intent to refuse federal education funding tied to federal mandates and failed to pass on Feb. 26.

SB 2194 - relating to the provision of and payment for early childhood education programs - failed on Jan 20.

SB 2206 - to create relating to the transition of funding responsibility for county social services from the counties to the state and a credit against payments in lieu of taxes paid by centrally assessed companies; and amend relating to county and multicounty social service board budgets, county general fund levy limitations, and property tax statements; and to repeal relating to the county human services fund, the human services grant program, county property tax levy authority for social services, and the state-paid property tax relief credit and to provide an effective date. The First Engrossment - to provide for the development of an implementation plan for state-funded county social services; and to provide for a report to the legislative assembly.

SB 2250 - relating to early childhood education programs - grants and data collection - clarification in bill can have 3 yr. old in program but not get reimbursed and to move funding to DPI from Commerce Dept. Referred to appropriations on March 20.

SB 2251 - relating to substance exposed newborns - signed by Governor on March 23. Moe talked to Sen. Poolman - Moe asked to have an amendment for referred to Part C early intervention. Do they automatically qualify for early intervention or refer to right track. Sen .Poolman said she was told there was concern if early intervention would be able to provide services.

Starting conversations with CPS and any questions give them to Kelli via email.

SB 2325 - relating to collaboration between agencies to coordinate early intervention services; and to provide for a legislative management study. Jill referenced

this earlier. Refers to Part C services and Gov. designating an agency to collaborate and coordinate with other early intervention partners. Passed the Senate and House and sent to Gov. on Monday.

SB 2041 - relating to the definition of developmental disability, and to provide for a report - children with down syndrome. Passed the House and Senate and amended in House to refer to the study using the technical assistance grant from CMS and looking at folks falling through Medicaid Waiver gap. Look at appropriateness of eligibility determination process for young children. Take into consideration the evaluation material available.

SB 2004 - to provide an appropriation for defraying the expenses of the state department of health; to amend relating to the tobacco settlement trust fund; and to repeal relating to the community health grant program; and to declare an emergency. The Maternal Child Health population/funding lies within this.

APR Data Specifics

Compile a report with letter of findings and send out to the ICC. This can be a topic item for the June ICC meeting.

Agenda Item - Letter of Findings

At January meeting reviewing APR data, it was mentioned it would be nice to have more specific information on previous findings for programs. Issue letters of findings next week, Amanda will compile a written report and send to the Council members on Indicators 1, 7, and 8.

At January meeting reviewed Indicator data, someone asked on Indicator 8b is 88.42 % compliance included

both and Amanda said yes, but it is wrong and should be 68.6%.

Levels of Determination

State receives a level of determination and each program will receive one also.

Amanda reviewed the document "Levels of Determination" with the members.

What we are seeing in looking at data, we are grouping much more together.

Have to have timely and reliable data. What is it that we should be measuring? We don't have any say in Indicators 1, 7, and 8. It has to be indicator related, whatever we pick.

See some data pulled from the last determination, might help guide us to what we need to measure — why are there so many none compliance? Break down of FFY 15 APR data region specific for the members. Could we get this data about 1 month before the meeting? Amanda will put the request in to DSS and tell them of the deadline to be May 9 to her.

Jill ties compliance to PIEPs evaluation. Use to know what the focus of our get togethers need to be looking at, what are we missing as a region, and for individual verification and we will see trends and provide help if it is needed by a staff person. Helpful for staff to know the end result, what are they shooting for.

Really looking at the whole system, how do we work young parents, teenage parents, how do we work with minorities.

<u>Open Meeting Requirements Presentation - Sandra</u> DePountis Asst attorney general holds open records/meetings records.

Open records

Any record in your possession is subject to open records.

Public business anything that comes before this council - anything relating to your duties as stated in the century code.

Record - any recorded messages, notes, email, any record of your public business.

Everything is open unless a state or federal law says otherwise.

Exceptions are found in the law.

Exempt and closed records you decide what to give out. Confidential information - must point to a law to obtain confidential information.

If your email/text is related to your public business, they can come and get that from you.

Open Meetings:

Anytime you have a quorum, ½ or more not majority. Anytime discussing your public business, it is a public meeting.

<u>Committees</u> - anytime you delegate your public business to 2 or more people they are subject to open meeting laws. You don't have anyone on the Council on the meeting, it doesn't matter. You have to post notice and take minutes.

Executive committee meets and works on the agenda, as long as you only discuss what topics to include in the agenda, it is not considered a meeting subject to open meeting laws because it is ministerial in nature.

You don't have to be face to face, as long as there is a quorum, and public business is discussed, it's a meeting subject to open meeting laws. You have to post a notice.

Regular committee meetings - have to post notice at the location of meeting, main office, on your website or with the secretary of state's office, and anyone that requested.

<u>Special meetings</u> you have to provide notice to the official newspaper. You have to stick to agenda and it has to be specific. Something changes regarding special meetings agenda - you have to add to the agenda and then repost it also.

Time specific topics - you don't have to stick to the times listed.

Meeting end times - nothing in the law about times.

<u>Timeline for public notice</u> - no minimum time notification. As soon as members know there is a meeting, the public should know.

<u>Special meeting dates set</u> - the public needs to know right away.

Public has right to attend - they do not have a right to speak unless you write on there, public comment.

Pitfalls with councils/boards/commission: Serial meetings occur when there is no quorum present at one time, but you collectively involve a quorum in your discussion.

Calling up another member and discussing your business and watch committees not involving a quorum in a series of conversations.

<u>Email</u> - Things that you can do by email: provide information to be reviewed by next meeting. You can set a meeting date and time.

Not allowed to - sharing thoughts/opinions and building consensus. Be careful before you reply all, have a quorum on email, it will be considered open meeting.

If just developing the agenda, it is not an open meeting.

Goes to executive committee for final approval and they do a reply all and add this - that is fine as you are not delving into the actual topic itself.

What happens if violate the laws - Office of Attorney General, investigates and issue an opinion and have a remedy section at the end of the opinion. They can also sue you.

Draft documents - make an open records request, they would have to deny it by citing to a specific law making the record exempt or confidential. If it is done being created, you can make a request.

The Department, DD Division, has a record and they are a part of the Council, would be required to show us the budget? They would have to point to some law denying you access to the record request.

You can't require requests to be in writing.

Voting and have quorum and several state employees are members and they abstain - by law you can only abstain 44-04-22 conflict of interest law: "a person acting in a legislative or quasi-legislative or judicial or quasi-judicial capacity for a political subdivision of the sate who has a direct and substantial personal or pecuniary interest in a matter before that board,

council, commission, or other body, must disclose the fact to the body of which that person is a member, and may not participate in or vote on that particular matter without the consent of a majority of the rest of the body."

Your standards operating procedures is not law, it is only policy. Speak to your attorney and ask them to do an analysis for the council on your concerns.

DaSy Linking Part C & Section 619 Cohort

DaSy has a cohort connecting the part c data to part b 619. There are requirements at 2 yr 6mon that lea notification has to go out. Cohort reps came to ND in Feb. what was decided is that what we will work on is how many children does the state serve ages birth to 5. The Governor's Office has an early childhood committee which Val and Amanda are not a part of. How many children are being served in each program? Cohorts met and have this early childhood day coming in and came up with a visual of the main programs. This was presented to the legislators at the early childhood day. Another thing they did was - at 2/5 and2/6 and parent opts out for lea notification it is their only chance for lea notification. Maybe parent changes their mind at 2/9 or 2/11, some parents are linking them to the school and school are taking as a referral and they shouldn't be. Came up with a form, lea notification form which has a referral date on it and it is a universal form and needs to be uploaded to our database. families that opt out at 2/5 or 2/6 and create a post out opt form so that school district knows the kid need to be found eligible. There is a list of what should be sent when the referral comes or indicating to the school when it will be coming. Decided to update the transition guide book and will be training on the 2 new forms and bring C and 619 together as there are so many new faces. Dates and locations are tentatively scheduled. There also has to be a consent or release

attached also of information from Part C to Part B. The cohort meets again in June in Cleveland, OH, and DaSy is meeting for their expenses.

What risks do you see and family opt outs and change mind and child is eligible for 619, can the system see the kid was Part C - no not now.

Referral is made to Part B at the 2/7 meeting and after meeting parents change mind; the process will not continue because parent changed their mind. At $1^{\rm st}$ grade and there are concerns, everything starts all over again- eligibility and writing an IEP.

Hold 2/7 meeting but parent not interested. No IEP is expected and kindergarten/ $1^{\rm st}$ grade they come back and any concerns – they have the profile information and name and hopefully they can link them.

If a private preschool - each private school has to be linked with another school.

September ICC Meeting

Sept 7 & 8

State IDEA has set their meeting date as Sept 7.

It is usually a joint meeting with IDEA.

Have done the ICC orientation by TACE during this time also.

Offered to have someone from DaSy come and do a presentation and walk through data with us. There will be a cost for this - do background of ICC and what it I supposed to be, bulk would be looking at the data, or separating out the state, parents, and then a combined time.

Parents lost interest, don't have a voice. We need to fix our parent representative roles. It is not just the parent rep it is also professional rep also that are not attending Technical assistance and keep the joint meeting. At the June meeting, Amanda will bring ideas of what the technical assistance presentation would/could look like.

Child Outcome Tool

Planning implementation date of July 1st of 2017. Offer to school districts that use it and depends upon availability and what the vendor wants to do.

CMS & Conflict Free Case Management

Opened waiver for an amendment to incorporate additional services, CMS gave us some questions. Expressed concern how our case management system is ran. Case managers and providers have Qs that work on the plans. Then we had to make admin rules changes and asked CMS if waiver would be approved by end of year and they said not comfortable in approving because of conflict with case management and they would stop and clock.

In 2014 CMS issued new rules and regs regarding HCBS waiver, the rules didn't change conflict free case management but provided additional clarification. We did an analysis and we felt it is conflict free as DDPM approve the plans. We have asked CMS what they feel is a conflict. CMS has not provided us the information we have asked for. We have had 2 calls since they stopped the clock. As long as provider is entering the plan whether DDPM approves, they view as conflict. We requested technical assistance which we received and is at priority. Only change to make is to increase capacity.

Meeting with our technical assistance staff weekly. It could be the wording we are using. Tina meeting with executive director and Medicaid director on what we want to do.

Reassure people that no one will be losing jobs. Providers are doing the coordination component. We are trying to get stakeholder involvement.

High Risk Eligibility Definition

Talked about at Dec and Jan meetings and using a group from DDPM and Infant Development to review the list and it is not an exhaustive list and some conditions are on it that we weren't sure why. Amanda coordinated a group and bring work to the ICC as whole but haven't had time to bring the group together.

SSIP due on Mon, April 3, have time in April to bring this group together and Amanda can send out a report, bring to the council, or do both.

There are 12 people who volunteered to be a part of the group.

When this group meets and comes to consensus, send to the ICC members and it will be on the June agenda.

Standing NDICC Agenda Items

NO committee reports.

SSIP

Amanda can send out the updated action strand and improvement action plan. Members were asked to look at the action strands.

Amanda will send the action strands to the members.